SERIAL NO. FILING DATE MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875) APPLICANT(S) CLAIMS AFTER AFTER
1st AMENDMENT 2nd AMENDMENT DEP. IND. DEP. IND. DEP. DEP. IND. DEP. DEP. <u>5</u>2  $2^{1}$ <u> 23</u> 28 30 37 22 <u>33</u> <u>35</u> 39 40 41 TAL TOJAL TOTAL CLAIMS DESCRIPTION OF THE PARTY OF THE °MAY BE ... &D FOR ADDITIONAL CLAIMS OR AMENDMENTO U.D. DUPARTMENT OF COMMUNOS